Revised 06/08

## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 610 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 60319

Fax: (515)281-4073 www.lowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of

FORM-OD		
Gift or Bequest information received by a department or accepted by the Governor on behalf of the state		
For office use only Indexed		
Audited		
Checked		
Computer		

ns report to the Government Oversight Committee. This form is to eccept of the gift or bequest	to the line within 20 days of Computer
DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUES	π:
STATE TRAINING SCHOOL	
Name of Department or Office 3211 EDGINGTON AVE ELDORA, IA 50627	
Mailing Address City, State, Zip Code	
Area Code & Telephone No.	
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	DE:
Kristin Hagedon	
Name same	
Malling Address (If different from above)	City, State, Zip (If different from above)
khagedo@dhs.state.ia.us Ernail Address	Area Code & Telephone Number (II different from above)
Salari I marayy	
OONOR OF GIFT OR BEQUEST:	
Lem Johnson, Colfax Center Church	
Name	
18935 K Avenue Holland, IA 50642	A 700 00
Mailing Address City, State, Zip Code	12/27/18 \$500.00
	Date of Gift or Bequest Amount/Value*
Area Code & Telephone Number	*value is defined as "fair market value" of item as determined by
Email Address (optional)	receiving department or office. If no value mark "0.00".
Ethali Address (optional)	
Provide a description of the gift or bequest and purpose thereof:	
monetary donation to the Religious Activities accoun	nt for students at STS.
inologacy dominon to the Ronglous retermos decom	
Criteria to use this form:	
Receipt of any gift or bequest that is received by any department of the	state or received by the Governor on behalf of the state.
	•
Statement of Affirmation:	
Kristin Hagedon affirm that the gift or bequest reported about	ve is accurate. I further affirm that the information concerning the donor and
assessment of the fair market value (if applicable) is correct and true to the	e best of my knowledge.
	·
7/1/2/1/	Dec. 27, 2018
Kristin Lagedon	
Signature	Date



To: IA Ethics & Campaign Disclosure

Company: Iowa Ethics & Campaign Disclosure Board

Fax: 1-515-281-4073

Phone:

From: State Training School

Fax: 515-564-4159 Phone: 641-858-5402

E-mail: KHagedo@dhs.state.ia.us

## **NOTES:**